Attorney Docket No. <u>1503-0</u>153P

BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

<u>Compensation</u>	of	reactive	power	via	a	frequency	converter

the specification of which is attached hereto. If not attached hereto, the application fortl

forth above and/or th	ne following:	actied fieleto, the application is identified by the a	,	
The specification	was filed on			20
United States Ap	plication Number			as
and amended on			(if applicable	e) and /or
the specification	was filed on		_ (a applicable	as PCT
amended on			(if ap	plicable)
I acknowledge t Regulations, \$1.56. I do not know an thereof, or patented o year prior to this app prior to this application date of this application	and do not believe the same was e r described in any printed publication, that the same was not but that the invention has not be	and the contents of the above-identified specifical which is material to patentability as defined ever known or used in the United States of Americation in any country before my or our inventified in the United States of the United States of the United States of America on an application of the United States of America on an application of the United States of America on an application of the United States of America on the United States of America on the United States of America on the United States of States (Julied States Code, §119(a)-(d) of any for the United States Code, §119(in Title 37, Coo ca before my or on thereof or n America more s certificate issu	de of Federal our invention nore than one than one year ted before the
THOI TOTCIBIT APPIL	canonis	ioni, io ciamea.	Priority (laimed
20021526 (Number)	Finland · (Country)	08/27/2002 (Month/Day/Year Filed)	, Q	
,	(county)	(World) Day/ Tear Filed)	Yes	No
(Number)	(Country)	(Month/Day/Year Filed)	□ Yes	□ No
(Number)	(Country)	(Month/Day/Year Filed)	☐ Yes	□ No
(Number)	(Country)	(Month/Day/Year Filed)	□ Yes	□ No
I hereby claim the bend	efit under Title 35, United States	Code, §119(e) of any United States provisional a	pplications(s) li	sted below.
(Application Number)		(Filing Date)		
(Application Number)		(Filing Date)		

Insert Provisional Application(s): (if any)

Insert Priority

Information: (if appropriate)

PLEASE NOTE:

YOU MUST PLETE THE

7 2003

Insert Title:

Fill in Appropriate

For Use Without Specification Attached:

Country

Application Number)	(Filing Date)
Application Number)	(Filing Date)
UI P 1 A 11 . 1	

All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:

Insert Requested Information: (if appropriate)

I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Insert Prior U.S. Application(s): (Application Number) (if any)

(Filing Date) (Status - patented, pending, abandoned)

Page 1 of <u>2</u> (Rev. 07/2003)

(Application Number)

(Filing Date)

Application Number

(Status - patented, pending, abandoned)

Date of Filing (Month/Day/Year)

Attorney	Docket No).
	DOCKELIVE	/·

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 02292

P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

•		and application of tany part	m boaca there	OII.				
ull Name of First or Sole Inventor: isert Name of	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
nsert Name of Inventor	Veijo KARPPINEN	1000		21.8.2003				
nsert Residence nsert Citizenship →	Residence (City, State & Country)		CITIZENSHI	P P				
·	65100 Vaasa, Finland		Finnish					
nsert Post Office Address →	MAILING ADDRESS (Complete Street Address	- · ·						
	Hovioikeudenpuist. 5 A	. 9, FIN-65100 Vaε	ısa, Fir	ıland				
ull Name of Second Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	,	DATE*				
see above	Risto KOMULAINEN	Posts Kenl		21.8.2003				
	Residence (City, State & Country)		CITIZENSHI	P				
	01820 Klaukkala, Finla		Finnish					
	MAILING ADDRESS (Complete Street Address		<u> </u>					
	Harjutie 5 A, FIN-0182	40 Klaukkala, Fin]	Land					
ull Name of Third Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
see above	<u></u>			!				
	Residence (City, State & Country)	······································	CITIZENSHII	P				
		!		i				
	MAILING ADDRESS (Complete Street Address	MAILING ADDRESS (Complete Street Address including City, State & Country)						
	i							
ull Name of Fourth Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
see above	l		. !	1				
	Residence (City, State & Country)		CITIZENSHII	P				
	1	,						
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
	<u> </u>							
ull Name of Fifth Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
see above			!	1				
	Residence (City, State & Country)	- 	CITIZENSHII	P				
	1	•						
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
	1							
tll Name of Sixth Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
see above			1	1				
	Residence (City, State & Country)		CITIZENSHII	P				
	I	1						
	MAILING ADDRESS (Complete Street Address	, including City, State & Country)	<u> </u>					

Page 2 of _2 (Rev. 07/2003)

*DATE OF SIGNATURE